Under the Paperwork Re	iduation Act of 1995	, no person are re	equires to n	sepond to a codecar				County unitari	
For FY 2006				Complete if Known Application Number 09/842,769-Conf. #002832					
				3.100010000011 - ACITATION 3		April 27, 2001			
				1 1111 0 0 1 10		Toshiya HAGIHARA			
						E. L. T. Umez			
Applicant claims send entry status. See 37 CFR 1 27				Art Unit 1765		765			
10TAL AMOUNT OF PAYMENT (\$) 180.00				Attorney Docket No.		1422-0472P			
METHOD OF PAYME	ENT (check all t	hat apply)							
Check Credi	t Card	doney Order	Non	Other	please identi	5/1			
x Deposit Account o	hann?		ЕЛ Эмровій Авор	unt Marier	Birch, Ste	wart. Kolasci	i & Birch, I	LP	
For the above-ide	entified deposit	account, the D	irector is	hereby authoriza	ed to: (checi	at that apply	}		
	(s) indicated be					icated below, e	except for t	he filing fee	
X Charge and fee(s) und	y additional fee(er 37 CFR 1.16	s) or underpay and 1.17	ments of	X Credit	any overpa	yments			
FEE CALCULATION									
1. BASIC FILING, SEAR					-	torio ti nome			
Application Type	FILIN Fee (\$) 300	G FEES Smail Entity Fee (\$)	5EA Fee (\$)	RCH FEES Small Entity Fee (S) 250	EXAMIN Fee (\$)	ATION PEES Small Entity Fee (\$1 100)		Fees Pald (\$)	
Utility	200	100	100	50	130	65		***************************************	
Design Plant	200	100	300	150	160	80			
Reissue	300	150	500	250	600	300			
Provisional	200	100	300	6	6	0			
2. EXCESS CLAIM FEE		190	•	.,		.,	***************************************	Small Entity	
Est Osseription Each claim over 20 (secinding Reissucs)							Fee (\$)	Egg.(\$) 25	
Each independent claim over 3 (including Reissues)							200	100	
Multiple dependent clair	ns						360	180	
Total Claims Extra Claims Fee (\$) Fee		Fee P	aid (\$)	Multiple Depen					
7 .45 s	7 -45 = × = =				Ees	2.(\$)	Fee Paid (E)	
Indep. Claims Ext	*	ee (\$)		aid (\$)					
APPLICATION SIZE F if the specification and jistings tattler 37 CF sheets or fraction the	TEE drawings exceed R 1.52(e)), the ereo(- See 35 t.	rd 100 sheets o application siz I.S.C. 41(a)(1)	of paper (se fee due (G) and :	is \$250 (\$125) 37 CPR J.16(s).	for small en	tity) for each :	computer sciditional 5	0	
Total Sheeta	Extra Sheets	Number 1		Iditional 50 or fra (maind up to a who			Fee	Paid (\$) Paid (\$)	
 OTHER FEE(S) Non-English Specific 							<u>. cwb</u>	7.437.781	
Other (e.g., late filing	surcharge): 18	306 Submiss	ion of an	Information D	isclosure S	Statement	18	30.00	
SUBMETTED BY	1 1								
Signature	f frem	A		Registration No.	32,881	Telephone	(703) 20	5-8000	
Name (PrintType) John V	V. Bailey					Date	November	15, 2006	